

Environmental/Occupational Health Compliance Certification Program

Self-Certification Checklist and Forms Booklet

For

Auto Body Repair Facilities



January 2006

Rhode Island Department of Environmental Management
Office of Technical and Customer Assistance
235 Promenade Street
Providence, RI 02908-5767
(401) 222-6822

<http://www.dem.ri.gov>

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Section 1.0 2006 Compliance Certification Instructions

1.1 What is Compliance Certification?

In order to improve environmental protection at less cost to both government and business, auto body repair facilities can now self-certify to the Department of Environmental Management (DEM) that they are complying with the environmental and occupational health protection requirements that apply to their business. This new, common sense approach to regulation holds great promise for making it easier for the auto body repair industry to meet - and surpass - Rhode Island's environmental and occupational health regulations. This package, developed in conjunction with a group of industry representatives, contains the materials needed to complete and submit the self-certification checklist. The accompanying workbook provides the information needed to help you understand and comply with state and federal environmental and occupational health and safety regulations. The entire program package has two parts:

- 1. Environmental and Occupational Health Compliance Certification Workbook For Auto Body Repair Facilities:** The workbook explains the environmental protection standards that apply to your facility, and how to make sure you are complying with them. The workbook is designed to be used in conjunction with the accompanying self-certification checklist and can also be used as a reference for your facility. The workbook also provides information regarding best management practices and pollution prevention techniques that can help your facility minimize human health risks and environmental impacts while saving money.
- 2. Self-Certification Checklist and Accompanying Forms Booklet (This Booklet):** The checklist requires facility information (facility name, address, owner, etc.), and contains a series of compliance questions, which generally require "yes" or "non answers about whether or not your facility is following the applicable environmental and occupational health and safety requirements. The checklist ends with a certification statement which must be signed by the facility owner. The checklist begins on page 11 of this booklet. Also, two additional forms are provided as follows:



- **2006 Non-Applicability Statement:** This statement is to be submitted only if you are not required to self-certify. See Section 1.1 of the workbook to determine if you are eligible to file a Non-Applicability Statement (You may file this statement only if there are no refinishing operations at your facility.) If there are no refinishing operations at your facility, then complete this form and submit it to DEM. It can be found on page 9 of this booklet.

Return-to-Compliance Plan: Complete the Return-to-Compliance Plan if your facility is not in compliance with a particular checklist item at the time of certification. The facility must detail its plans to address the particular items to bring them back into conformance with environmental, health and safety regulations within a specified period of time. Copies of this form can be found starting on page 28 of this booklet.

1.2 Submission Timeline

Workbooks and checklists were mailed in early 2006. **Certification Checklists** must be returned and postmarked by June 30, 2006. **Return-to-Compliance Forms** must also be submitted with the checklists on or before June 30, 2006. Facilities that submit **Return-to-Compliance Forms** will receive an additional 60-day grace period in which to bring their operations into compliance. Certification will take place every two years. Checklists are expected to be sent again in January of 2008.

Questions and/or Comments can be directed to:

RI DEM - Office of Technical and Customer Assistance
Auto Body Repair Facilities Certification Program
235 Promenade Street
Providence, RI 02908-5767
(401) 222-6822

1.3 Do I have to certify?

Participation in the program is voluntary. However, any facility with operations involving collision repair; vehicle painting, paint stripping or sanding; body work; antique restoration; and/or student training in any of the



aforementioned areas should consider participating in this Self-Certification Program to take advantage of the incentives detailed in Section 1.2 of the workbook. If a painting operation is included as part of a new or used car dealership or general auto repair shop, it is also considered a refinishing operation in the Self-Certification Program. All facilities that are licensed by the Department of Business Regulation as an auto body or collision repair facility are eligible to participate in the Self-Certification Program. [Note: facilities involved in auto body or collision repair **must** be licensed by the Rhode Island Department of Business Regulation.]

All auto body or collision repair facilities operating in the State of Rhode Island must comply with the standards outlined in the workbook, whether or not they self-certify. If you intend to participate in the program, complete and return the certification checklist as instructed.

If your facility does not meet the description of an auto body or collision repair facility, or if this package has been sent to you in error, please complete, and sign the **2006 Non-Applicability Statement** found on page 9 of this booklet, and return to DEM. If you have any questions regarding the status of your shop, please call us at 222-6822.

1.4 How Do Fill Out the Compliance Certification Forms?

1. **Read the accompanying Certification Workbook** to understand your environmental, worker health and safety responsibilities.
2. Make a copy of the **Certification Checklist** to use as a working draft.
3. Read the checklist and identify all the questions that apply to your facility. You may not have to answer all of the questions on the form. The form itself will direct you to skip certain questions. Do not answer questions that you are directed to skip. Additional step-by-step instructions for the **Certification Checklist** are included in Section 1.8.
4. Walk through your facility with the checklist copy and identify all the questions where you are already in compliance, and those where you will need to make changes to come into compliance. This step should be done *well* in advance of June 30, 2006.



5. If your facility will be out of compliance after June 30, 2006, be sure to submit a **Return-to-Compliance Plan** for each checklist item that you are not in compliance with.
6. Review your **Certification Checklist** for completeness. Once complete, copy your answers from the draft, make a copy of the completed certification checklist for your files, and mail the original signed copy to DEM.

1.5 How do I submit a Compliance Certification?

If you intend to participate in the program, you are required to complete the certification checklist and mail it to DEM on or before June 30, 2006. Mail completed certification checklist forms to:

RI Department of Environmental Management
Office of Technical and Customer Assistance
Auto Body Repair Facilities Certification Program
235 Promenade Street
Providence, RI 02908-5767

1.6 What is not covered by the Compliance Certification?

This Compliance Certification is intended to review many environmental and worker health and safety requirements. There may be other Federal or Local requirements or permits that apply to your facility such as building codes, fire codes, etc. that are not covered. You must still comply with these requirements.

1.7 What Does Participation in the Self-Certification Program Entitle Your Shop To?

DEM: Compliance with environmental regulations is a requirement of all automotive refinishing facilities. Participation in the Self-Certification Program is voluntary, but entitles your shop to the following incentives:

- reduced inspection priority by DEM,
- the ability to correct environmental violations without gravity-based penalties,



- making you better prepared for a random inspection,
- free technical assistance from DEM's Office of Technical and Customer Assistance
- being placed on a public list of certified auto body repair facilities
- receiving a Certificate of Participation from DEM

OSHA: Compliance with occupational health and safety laws is a requirement of all automotive refinishing facilities. Participation in the Self-Certification Program is voluntary, but entitles your shop to the following incentives:

- a comprehensive evaluation of your shop's compliance status,
- free technical assistance from RI Department of Health's OSHA Consultation Program.

Note: Participation in the Self-Certification Program does not guarantee that your shop will not be subject to a random inspection, or an inspection prompted by an employee or neighbor complaint. Both state and federal environmental and occupational health and safety agencies have the authority to perform such inspections. These inspections can result in enforcement actions against your facility. Participation in this program will identify deficiencies and prepare your facility in the event of an inspection. Keep copies of your checklists to assist you in demonstrating compliance with applicable state and federal regulations.

1.8 Step-by-step instructions for filling out the Compliance Certification Checklist.

Facility Information

In this section, list the name and address of your business, the individual that DEM should contact if there are questions about your *Certification*, and your Federal Employer Identification number (FEIN) from your state and federal income tax forms.

Non-Applicability Statement

If your facility does not meet the description of an auto body or collision repair facility, or if this package has been sent to you in error, please complete, sign and return to DEM the **2006 Non-Applicability Statement** found on page 9 of



this booklet. If you have any questions regarding the status of your shop, please call us at 222-6822.

Compliance Certification Checklist

These questions provide DEM with some background information about your facility and information about whether or not your facility is following the environmental protection standards and requirements that apply to it. The workbook contains the information you will need to determine how to answer the questions. The checklist tells you where in the workbook you can find information about the environmental requirements referred to in each question. DEM strongly advises you to consult the *Certification Workbook* before answering any questions. Most of the questions are "yes" or "no" questions about compliance with particular standards. If you are not in compliance with the requirements on the date you certify, you must complete a *Return-to-Compliance Plan* (described below) and submit it with the *Compliance Certification Checklist*.

Please note that it is your responsibility to keep your facility in compliance with environmental protection requirements at all times. You may be subject to enforcement action if you do not comply with the standards. There are some questions that ask whether you have been doing a routine activity for the past year, such as properly maintaining your equipment. Be sure to comply with the requirements throughout the year. The *Certification Statement* includes a pledge that you have systems in place to keep your business in compliance with environmental protection standards over the coming years.

Certification Statement

The *Certification Statement* is a preprinted statement which says that the person signing the form:

- has reviewed it,
- believes the information being submitted is true,
- will make sure that management systems are in place that will keep the facility in compliance with environmental protection requirements throughout the coming year, and



- understands that there may be serious consequences for submitting false information to DEM.

The statement may only be signed by the facility owner or certain other types of senior managers. The types of managers that are allowed to sign the statement are listed below the space for the signature. The person who signs the form must also print or type his or her name and title on the appropriate lines, date the form, and check the space next to the type of manager he or she is. Note that you must hold one of the titles listed on the form to sign it.

Return-to-Compliance Plan (RTC)

- MAKE COPIES OF THIS FORM BEFORE YOU BEGIN -

If your facility is unable to comply with a standard at the time you certify, fill out this form. The form asks for the standard you are violating, what you plan on doing to comply, and when you will be in compliance with the requirement. Note that submittal of a RTC gives only an additional sixty (60) days to come into compliance. A separate form is required each time your answer to a checklist question indicates that a ***Return-to-Compliance Plan*** is required. Three copies of a ***Return-to- Compliance Plan Form*** can be found starting on page 28 of this booklet. If you need more forms, make the necessary number of copies or call us for additional copies at (401) 222-6822. Attach all ***Return-to-Compliance Plan Forms*** to your completed ***Compliance Certification Checklist***, and mail to DEM.



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Rhode Island Department of Environmental Management
Auto Body Repair Facilities Certification Program
2006 Facility Non-Applicability Statement



Note: Participation in the program is voluntary. However, any facility with operations involving collision repair; vehicle painting, paint stripping or sanding; body work; antique restoration; and student training in any of the aforementioned areas should consider participating in the Self-Certification Program to take advantage of the incentives detailed in Section 1.2. If a painting operation is included as part of a new or used car dealership or general auto repair shop, it is also considered a refinishing operation in the Self-Certification Program. All facilities that are licensed by the Department of Business Regulation as an autobody or collision repair facility are eligible to participate in the Self-Certification Program. [Note: facilities involved in autobody or collision repair must be licensed by the Department of Business Regulation.] If your facility does not meet the description of an autobody or collision repair facility (see description above), or if this package has been sent to you in error, please complete, sign and return the **2006 Non-Applicability Statement** to DEM. If you have any questions regarding the status of your shop, please call us at 222-6822.

Facility Information:

Facility Name _____

Facility Street Address: _____ Phone # _____

_____ Fax #: _____

City/Town: _____ Federal Employer ID # (FEIN) _____

Zip Code: _____

Contact Person: _____ Owner: _____

This Facility is not participating in the Auto Body Repair Facilities Certification Program for the following reason(s):

☐ No automotive-refinishing operations occur at this address.

☐ The facility only performs mechanical auto repair.

Please Submit this form by June 30, 2006

Returning this statement does not relieve you of your responsibility to comply with other environmental requirements.

Signature: _____ Date: _____

Return this form to: RI DEM/Office of Technical & Customer Assistance
Auto Body Repair Facilities Certification Program
235 Promenade Street
Providence, RI 02908-5767



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Rhode Island Department of Environmental Management
Auto Body Repair Facilities Certification Program
2006 Compliance Certification Checklist



Section A: Facility Information

Facility Name: _____

Facility Street Address: _____ Phone #: _____

_____ Fax #: _____

City/Town: _____ Federal Employer ID # (FEIN) _____

Zip Code: _____ # Employees: _____

Contact Person: _____ Owner: _____

Cars processed per week: _____ RI DBR License #: _____

Has your shop ever received any environmental or OSHA assistance through a consultant or state technical assistance program?

☐ Yes ☐ No

Section B: Hazardous Waste Compliance Checklist

Please answer all questions, unless you are directed to skip a question. Do not answer questions that you are directed to skip.

Hazardous Waste: Questions for all Auto Body Shops

B.1 Does your shop generate hazardous wastes?

[See Section 4.1 (pg. 19) of the workbook]

☐ Yes ☐ No -Answer B.2
then skip to C.1

B.2 Regarding all your wastestreams, do you have appropriate documentation or process knowledge which supports your hazardous waste determination? [See Section 4.1 (pg. 19) of the workbook]

☐ Yes ☐ No Submit Return-to-
Compliance (RTC) Plan

B.3 What is your facility's hazardous waste identification number?
[If you do not currently have one, refer to Section 4.6 (pg. 33)
of the workbook.]

B.4 How much hazardous waste did you ship from your facility in _____

Gals/Lbs



the last full year (2005)?

(circle measure used)

B.5 Do you have appropriate documentation which shows where hazardous waste is being shipped? [See Section 4.6 and 4.9 (pg. 33 & 39) of the workbook.]

☐ Yes ☐ No -Submit Return-to-Compliance (RTC) Plan

B.6 Has your shop submitted to DEM a list of authorized agents that are allowed to sign the manifest? [See Section 4.6 (pg. 33) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.7 Where is your hazardous waste being accumulated/stored? [See Section 4.2 (pg. 23) of the workbook.]

- ☐ Only Satellite Accumulation Area(s) -Answer B.8 end then skip to C.1
☐ A 90-Day Storage Area -Skip B.8 and answer the remainder of questions in Sec.B
☐ Both Satellite Accumulation Area(s) and A 90-Day Storage Area -Answer all questions

B.8 Regarding the satellite accumulation area. [If not applicable, skip to Question B.9] [See Section 4.2 (pg. 23) of the workbook.]

- a) Is the area clearly marked and the container properly labeled with the words "Hazardous Waste" and the contents of the container? ☐ Yes ☐ No -Submit RTC
b) Is the container under control of the operator and at or near the point of generation? ☐ Yes ☐ No -Submit RTC

B.9 Regarding the hazardous waste storage area: [See Section 4.3-4.5 (pg. 25-32) of the workbook]

- a) Are all containers in good condition? ☐ Yes ☐ No -Submit RTC
b) Are containers labeled with the words "Hazardous Waste"? ☐ Yes ☐ No -Submit RTC
c) Are containers labeled with name of the waste, and its waste code? ☐ Yes ☐ No -Submit RTC
d) Are containers labeled with the hazard classification? ☐ Yes ☐ No -Submit RTC
e) Are containers labeled with the date that they were placed in the storage area? ☐ Yes ☐ No -Submit RTC
f) Is the area itself secure and protected from stormwater? ☐ Yes ☐ No -Submit RTC

B.10 Does your hazardous waste storage area meet the criteria For secondary containment (i.e. spill/leak containment capability)? [See Section 4.4 (pg. 29) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.11 Is the area inspected weekly for signs of spills or container deterioration? [See Section 4.3 (pg. 25) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.12 Is this inspection documented (i.e., do you keep written

☐ Yes ☐ No -Submit RTC



records)? [See Section 4.3 (pg. 25) of the workbook.]

B.13 Are you shipping your hazardous waste off-site according to the 90-day storage time limit?
[See Section 4.2 (pg. 23) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.14 If the storage area contains ignitables: [See Section 4.3 (pg. 25) of the workbook.]

- a) Is the area separated from sources of ignition? ☐ Yes ☐ No -Submit RTC
- b) Are "No Smoking" signs posted in the area? ☐ Yes ☐ No -Submit RTC
- c) Is the area located at least 50 feet from the property line? ☐ Yes ☐ No -Submit RTC
- d) Are drums of ignitable waste electrically grounded? ☐ Yes ☐ No -Submit RTC

B.15 Does your shop contain and maintain emergency equipment designed to help your shop reduce the possibility of an explosion, fire, or unplanned/accidental release of hazardous materials?
[Full provisions are contained in Section 4.7 (pg. 36) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.16 Does your shop have a written contingency plan designed to help your shop reduce hazards associated with the possibility of an explosion, fire, or unplanned/accidental release of hazardous materials? [general provisions are contained in Section 4.7 (pg. 36) and Appendix A (pg. 86) of the workbook.]

☐ Yes ☐ No -Submit RTC & Skip to B.19

B.17 Does your written plan: [General provisions are contained in Section 4.7 (pg. 36) and Appendix A (pg. 86) of the workbook.]

a) Describe arrangements agreed to by local police departments, fire departments, etc.?

☐ Yes ☐ No -Submit RTC

b) List names, addresses, and telephone numbers of emergency coordinators?

☐ Yes ☐ No -Submit RTC

B.18 Has this plan been submitted to local emergency response providers (i.e., local police department, fire department, hospital, and state/local emergency response teams)?

☐ Yes ☐ No -Submit RTC

B.19 Does your shop have an employee training program that teaches them proper hazardous waste management procedures, including how to implement the contingency plan? [Full provisions are contained in Section 4.8 (pg. 38) of the workbook.]

☐ Yes ☐ No -Submit RTC

B.20 Does your shop have records indicating that an employee training program is occurring? [See



Section 4.8 and 4.9 (pg. 38-39) of the workbook.]

☐ Yes ☐ No -Submit RTC

Section C: Air Pollution Compliance Checklist

Please answer all questions, unless you are directed to skip a question. Do not answer questions that you are directed to skip.

Air Pollution: Questions for all Auto Body Facilities

C.1 a) Does your shop generate sanding dust?

[See Section 5.1 (pg. 42) of the workbook.]

☐ Yes ☐ No Skip to C.2

b) Do you control dust emissions from your facility using a specific device?

☐ Yes ☐ No

If yes, please describe the dust control device _____

c) Does your shop use a ventilated sander (dustless vacuum) system?

☐ Yes ☐ No

C.2 Does your facility use a methylene chloride-based paint stripper?

[See Section 3.2 (pg. 12) and Section 5.2 (pg. 43) of the workbook.]

☐ Yes ☐ No

a) If "Yes", how many gallons does your shop use annually? _____ Gallons

C.3 Do you use coatings that comply with the emission limitations listed in Rhode Island Air Pollution Control Regulation No. 30, Control of Volatile Organic Compounds from Automobile Refinishing Operations? [See Section 5.2.1 (pg. 44) of the workbook.]

☐ Yes ☐ No -Submit RTC

C.4 Do your painters and technicians use spray guns that have a transfer efficiency of at least 65% such as High Volume Low Pressure (HVLP) spray equipment? [See Section 5.2.2 (pg. 45) of the workbook.]

☐ Yes ☐ No -Submit RTC



C.5 Do you use a spray gun cleaner or a similar device to clean spray guns that recirculates the cleaning solvent and collects the solvent for proper disposal? [See Section 5.2.2 (pg. 45) of the workbook.]

☐ Yes ☐ No Skip to C.6

a) Is your cleaning device totally enclosed during cleaning, rinsing, and draining operations?

☐ Yes ☐ No -Submit RTC

C.6 Do you store solvents, waste paint, sludge, and shop rags/towels saturated with solvent in closed containers?

☐ Yes ☐ No -Submit RTC

a) Do you dispose of such materials in a way that follows proper state and federal hazardous waste and solid waste disposal regulations?

[See Section 4.0 (pg. 19) of the workbook.]

☐ Yes ☐ No -Submit RTC



Section D: Water Pollution Compliance Checklist

Please answer all questions, unless you are directed to skip a question. Do not answer questions that you are directed to skip.

Water Pollution: Questions for all Autobody Facilities

D.1 Does your shop have open floor drains that are currently in use?

☐ Yes ☐ No Skip to D.2

If "Yes", do the floor drains lead to: (Please mark all appropriate boxes, then proceed to the following subsection and answer those questions to determine your level of compliance. Answer questions only in the section indicated):

- ☐ A sewer system - Answer questions in D.1.A [See Section 6.2.3 (pg. 48)]
- ☐ A septic system - Answer questions in D.1.B [See Section 6.2.2 (pg. 48)]
- ☐ A drywall or other subsurface leaching system - Answer questions in D.1.B [See Section 6.2.1 (pg. 47)]
- ☐ Direct discharge to a waterway - Answer questions in D.1.C [See Section 6.2.6 (pg. 49)]
- ☐ A holding tank - Answer questions in D.1.D [See Section 6.2.5 (pg. 49)]
- ☐ Other (Please Specify) _____ -Skip to D.2
- ☐ Unknown -You must find where your wastewater goes -Submit RTC

D.1.A If your shop has the potential to discharge wastewater to your local sewer authority (such as the Narragansett Bay Commission, or a city/town wastewater treatment authority), do you have a process wastewater discharge permit or other proper documentation allowing this discharge? [See Section 6.2.3 (pg. 52) of the workbook.]

☐ Yes ☐ No -Submit RTC

i) Does your shop, in accordance with the provisions of your wastewater discharge permit, perform:

Periodic sampling,	<input type="checkbox"/> Yes <input type="checkbox"/> No -Submit RTC	<input type="checkbox"/> Not Required
Monitoring and inspection,	<input type="checkbox"/> Yes <input type="checkbox"/> No -Submit RTC	<input type="checkbox"/> Not Required
Recordkeeping?	<input type="checkbox"/> Yes <input type="checkbox"/> No -Submit RTC	<input type="checkbox"/> Not Required



- ii) Does your shop meet the wastewater discharge limits set by your local wastewater treatment authority?

☐ Yes ☐ No -Submit RTC ☐ Unknown -Submit RTC

- iii) Wastewater permits may contain requirements for development of a Toxic Organic/Solvent Management Plan to ensure proper use, storage and disposal of organic chemicals. Has your shop developed and implemented this plan? [See Section 6.4 (pg. 54) of the workbook.]

☐ Not required in my permit ☐ Yes ☐ No -Submit RTC

- iv) Wastewater permits may contain requirements for development of a Spill and Slug Control and Countermeasures Plan to ensure that accidental spills do not impact the sewer system. Has your shop developed and implemented this plan? [See Section 6.4 (pg. 54) of the workbook.]

☐ Not required in mv permit ☐ Yes ☐ No -Submit RTC

- v) Does your shop have a process wastewater pretreatment system, including an oil and solids/grit separator?

☐ Not required in mv permit ☐ Yes ☐ No -Submit RTC

- vi) If your shop has a pretreatment system, does it prevent materials such as solvents, antifreeze, sludge, waste oils and heavy metals (such as lead, copper, nickel etc.), from discharging to the sewer system?

☐ No pretreatment svstem ☐ Yes ☐ No -Submit RTC

- vii) Has your shop obtained a laboratory analysis (from an authorized laboratory) of any waste material (sludge) that collects in your pretreatment system?

☐ No pretreatment svstem ☐ Yes ☐ No -Submit RTC

- a) If you answered yes, did the laboratory results indicate that the sludge should be classified as hazardous waste? [See Section 4.1 (pg. 17) of the workbook.]

☐ Yes ☐ No Skip to viii

- b) If you answered yes to (a) above, is your shop handling the sludge as a hazardous waste under DEM's Rules and Regulations for Hazardous Waste Management? [See Section 4.0 (pg. 19) of the workbook.]

☐ Yes ☐ No -Submit RTC



- viii) Does your shop have secondary containment for all chemicals, including paints, thinners, strippers, cleaners and automotive fluids, so as to prevent potential spills from entering open floor drains or other access ways to water sources?

☐ Yes ☐ No -Submit RTC

- D.1.B Does your shop have the potential to discharge wastewater to the subsurface (underground) by way of a dry well, septic system, or other means? [See Section 6.2.1, 6.2.2 (pg. 51-52) of the workbook.]

☐ Yes ☐ No Skip to D.1.C

- i) Does your shop have a DEM approval to discharge wastewater in this manner?

☐ Yes ☐ No -Submit RTC

- ii) Does your shop have a process wastewater pretreatment system, including an oil and solids/grit separator?

☐ Yes ☐ No -Submit RTC

- iii) Does your shop have secondary containment for all chemicals, including paints, thinners, strippers, cleaners and automotive fluids, so as to prevent potential spills from entering open floor drains or other access ways to water sources?

☐ Yes ☐ No -Submit RTC

- D.1.C Does your shop discharge wastewater directly to the waters of the state (for example, is the wastewater piped directly to wetlands, streams, rivers, ponds, lakes, or other surface bodies of water)? [See Section 6.2.6 (pg. 53) of the workbook.]

☐ Yes ☐ No Skip to D.1.D

- i) Does your shop have a DEM permit to discharge wastewater in this manner?

☐ Yes ☐ No -Submit RTC

- ii) Does your shop have a process wastewater pretreatment system, including and oil and solids/grit separator?

☐ Yes ☐ No -Submit RTC & Skip to v

- iii) Does your shop's pretreatment system prevent materials, such as solvents, antifreeze, sludge and waste oils from discharging to the surface water?

☐ Yes ☐ No -Submit RTC

- iv) Has your shop obtained a laboratory analysis (from an authorized laboratory) of any waste material (sludge) that collects in your pretreatment system?

☐ Yes ☐ No



- a) If you answered yes, did the laboratory results indicate that the sludge should be classified as hazardous waste? [See Section 4.1 (pg. 19) of the workbook.]

☐ Yes ☐ No Skip to v

- b) If you answered yes to (a) above, is your shop handling the sludge as a hazardous waste under DEM's Rules and Regulations for Hazardous Waste Management? [See Section 4.0 (pg. 19) of the workbook.]

☐ Yes ☐ No -Submit RTC

- v) Does your shop have secondary containment for all chemicals, including paints, thinners, strippers, cleaners and automotive fluids, so as to prevent potential spills from entering open floor drains or other access ways to water sources?

☐ Yes ☐ No -Submit RTC

- D.1.D Does your shop discharge water to an underground holding tank? [See Section 6.2.4 (pg. 52) of the workbook.]

☐ Yes ☐ No Skip to D.2

- i) Has your shop obtained a laboratory analysis (from an authorized laboratory) of the components of the waste material (including any sludge) from this tank?

☐ Yes ☐ No -Submit RTC

- ii) If you answered "Yes", did the laboratory results indicate that the sludge should be classified as a hazardous waste?

☐ Yes ☐ No Skip to D.2

- iii) If you answered "Yes" to (ii) above, is your shop handling the sludge as a hazardous waste under DEM's Rules and Regulations for Hazardous Waste Management? [See Section 4.0 (pg. 19) of the workbook.]

☐ Yes ☐ No -Submit RTC

- iv) Is this tank registered with DEM's Underground Storage Tank Program?

☐ Yes ☐ No -Submit RTC

- v) Is the underground holding tank part of a wastewater recycling system?

☐ Yes ☐ No



D.2 Does your shop contain **open floor drains** that are **not currently in use**?

☐ Yes ☐ No Skip to D.3

D.2.A Do you know where these drains discharge?

☐ Yes ☐ No -Submit RTC

D.2.B Have these drains been properly closed?

☐ Yes ☐ No -Submit RTC
and See Note Below

NOTE: If D.2.B is "No", contact your local sewer authority or DEM's Underground Injection Control Program to arrange for an appointment to have these drains sealed under the supervision of a representative from either agency.

D.3 Does your shop contain **floor drains** that have been **previously closed or sealed**?

☐ Yes ☐ No Skip to D.4

D.3.A Was this drain/drains closed under the supervision of a representative from your local sewer authority or DEM's Underground Injection Control Program?

☐ Yes ☐ No -Submit RTC
and See Note Below

NOTE: If D.3.A is "No", contact your local sewer authority or DEM's Underground Injection Control Program to arrange for an appointment to have these drains sealed under the supervision of a representative from either agency.

D.4 Does your shop allow process wastewater (i.e., from wet sanding, car washing, work area washing) to run off your site to storm drains or other areas (i.e., water runs down the street, water runs off to soil or sand area, water just puddles up and evaporates)? [See Section 6.2 (pg. 51) of the workbook.]

☐ Yes -Submit RTC ☐

D.5 Does your shop discharge wastewater (other than sanitary wastewater) to bathroom/kitchen sinks, toilets, showers, shop wash basins, emergency showers, eyewash stations, or other non industrial drainage outlets?

☐ Yes -Submit RTC ☐

D.6 Does your shop post signs prohibiting the discharge of industrial chemicals and/or wastewater to bathroom/kitchen sinks, toilets, showers, shop wash basins, emergency showers, eyewash stations, or other non-industrial drainage outlets?

☐ Yes ☐ No -Submit RTC



D.7 Shops are prohibited from discharging materials such as concentrated paints, fuels, oils and other vehicle fluids, solvents, thinners, strippers, cleaners (including concentrated soaps), and solid materials generated from sanding operations and other autobody repair preparation materials. Does your shop have the potential to discharge these fluids to underground or surface waters of the state?

☐ Yes -Submit RTC ☐

D.8 Does your shop sweep, blow, or wash floor dirt, dust, and/or other debris (sweepings) down open floor drains?

☐ Yes -Submit RTC ☐

D.9 Does your shop perform wet sanding?

☐ Yes ☐ No Skip to D.10

i) If yes, does your shop have a system in place for recycling or for proper disposal of the wastewater created during wet sanding?

☐ Dries in Floor ☐ Yes ☐ No -Submit RTC

D.10 Does your shop hand wash or hose down autobody tools and equipment as a way of removing excess paint and/or solvents? [See Section 6.1 (pg. 50) of the workbook.]

☐ Yes ☐ No Skip to D.11

i) If "Yes", does your shop have a system in place for recycling or for proper disposal of the wastewater created during this activity?

☐ Yes ☐ No -Submit RTC

D.11 Does your shop use a laundry service to wash employees' work clothes?

☐ Employees take clothes home ☐ Yes ☐ No Skip to D.11



Section E: Worker Health and Safety Checklist

Please answer on questions, unless you are directed to skip a question. Do not answer questions that you are directed to skip.

Worker Health and Safety: Questions for all Autobody Facilities

E.1 Has the employer posted the **Job Safety & Health Protection** poster?

[See Section 7.2 (pg. 58) of the workbook.]

☐ Yes ☐ No -Submit RTC

E.2 Has the employer maintained the **OSHA 300 log** (recording all occupational injuries/ illnesses)

Note: This applies only to shops with more than 10 employees at any point during the year.

[See Section 7.3 (pg. 59) of the workbook.]

☐ 10 employees or less ☐ Yes ☐ No -Submit RTC

E.3 Has a **Hazard Communication (Right-To-Know) Program** been established?

[See Section 7.4 (pg. 59) of the workbook.]

☐ Yes ☐ No -Submit RTC &
Skip to E.4

With regard to the Hazard Communication Program:

a) Has your shop obtained a **Material Safety Data Sheet (MSDS)** for each hazardous chemical in use? [See Section 7.4.2 (pg. 61) of the workbook.]

☐ Yes ☐ No -Submit RTC

b) Has your shop reviewed each MSDS to be sure it is complete and up-to-date? [See Section 7.4.2 (pg. 61) of the workbook.]

☐ Yes ☐ No -Submit RTC

c.) Has your shop made sure that MSDSs are available where necessary? [See Section 7.4.2 (pg. 61) of the workbook.]

☐ Yes ☐ No -Submit RTC

d) Has your shop developed a system to ensure that all incoming hazardous chemicals are labeled, and are all containers labeled, tagged, or marked to include the identity of the chemical and appropriate hazard warnings? [See Section 7.4.3 (pg. 62) of the workbook.]

☐ Yes ☐ No -Submit RTC

e) Has a **Written Hazard Communication Program** been developed and implemented?

[See Section 7.4.4 (pg. 62) in the workbook.]

☐ Yes ☐ No -Submit RTC &
Skip to g



f) Does the Written Hazard Communication Program list all of the hazardous chemicals in the shop? [See Section 7.4.4 (pg. 62) in the workbook.]

☐ Yes ☐ No -Submit RTC

g) Has your shop developed a method to communicate hazards to employees and others *-including outside contractors?* [See Section 7.4.4 (pg. 62) in the workbook.]

☐ Yes ☐ No -Submit RTC

h) Has a thorough Training Program been established as part of the Hazard Communication Standard? [See Section 7.4.5 (pg. 63) of the workbook.]

☐ Yes ☐ No -Submit RTC

With regard to the training program:

1) Does your shop train new employees before their first assignment?

☐ Yes ☐ No -Submit RTC

2) Has your shop informed employees of the requirements of the Standard?

☐ Yes ☐ No -Submit RTC

3) Has your shop informed employees of the different types of chemicals and the hazards associated with them?

☐ Yes ☐ No -Submit RTC

4) Has your shop trained employees in the use of proper work practices, personal protective equipment and clothing, and other controls to reduce or eliminate their exposure to the chemicals in their work areas?

☐ Yes ☐ No -Submit RTC

5) Does your shop explain how to read and use an MSDS?

☐ Yes ☐ No -Submit RTC

6) Has your shop developed a system to ensure that all incoming hazardous chemicals are checked for proper labels and data sheets?

☐ Yes ☐ No -Submit RTC

7) Has your shop developed a way to identify and inform employees of new hazardous chemicals before they are introduced into a work area?

☐ Yes ☐ No -Submit RTC



E.4 Has the employer established a **Personal Protective Equipment Program (PPE)**

[See Section 7.5 (pg. 65) of the workbook.]

☐ Yes ☐ No -Submit RTC &
Skip to E.5

- a) Has your shop performed an initial hazard assessment to determine if the use of PPE (e.g. goggles, gloves, glasses) is required?

☐ Yes ☐ No -Submit RTC

- b) Has your shop performed annual hazard assessments to determine if the use of PPE is required?

☐ Yes ☐ No -Submit RTC

- c) Does your shop have documentation that the initial and annual PPE assessments have occurred?

☐ Yes ☐ No -Submit RTC

- d) Has your shop provided PPE that protects employees from the assessed hazards?

☐ Yes ☐ No -Submit RTC

- e.) Have employees been informed how the PPE is to be utilized, including how to wear PPE, its useful life, and how to maintain, clean and dispose of it?

☐ Yes ☐ No -Submit RTC

- f) Does your shop enforce the use of PPE?

☐ Yes ☐ No -Submit RTC

E.5 Has the employer established a **Respiratory Protection Program?**

[See Section 7.6 (pg. 71) of the workbook.]

☐ Yes ☐ No -Submit RTC &
Skip to E.6

- a) Has your shop selected the proper respirator based on the hazard?

☐ Yes ☐ No -Submit RTC

- b) Have all employees who wear respirators had a medical examination specific for respirator use? (Note: your company should have physician letters on file.)

☐ Yes ☐ No -Submit RTC

- c) Has your shop fit-tested employees?

☐ Yes ☐ No -Submit RTC



d) Has your shop trained employees in the proper use, care, and sanitation of respirators?

☐ Yes ☐ No -Submit RTC

e.) Does your shop have a written program (i.e., one that includes selection, use, fit test, maintenance, etc.) on respirator usage?

☐ Yes ☐ No -Submit RTC

f) Does your shop provide a cartridge change schedule (as part of a written program, see "e" above) for chemical/solvent respirators?

☐ Yes ☐ No -Submit RTC

E.6 Has your company developed a Lockout/Tagout Program? [See Section 7.7 (pg. 79) of the workbook.]

☐ Yes ☐ No -Submit RTC

If yes, does the shop conduct an inspection of the energy control procedure at least annually to determine if these requirements are followed, -including documentation?

☐ Yes ☐ No -Submit RTC

E.7 Has your shop developed an Emergency Action Plan?
[See Section 7.8 (pg. 82) of the workbook.]

☐ Yes ☐ No -Submit RTC

a) Is this plan written? (Note: This applies only to shops with 10 or more employees.)

☐ Less than 10 employees ☐ Yes ☐ No -Submit RTC

b) Are shop evacuation routes, emergency phone numbers, and physical hazards posted?

☐ Yes ☐ No -Submit RTC

c) Are employees trained in proper procedures during an emergency?

☐ Yes ☐ No -Submit RTC



Section F: Certification Statement

Note: Complete all required Return-to-Compliance Plans (RTC) before signing this statement!

I _____, attest under the pains and penalties of perjury:

- I) That I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement;
- II) That, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is, to the best of my knowledge, true, accurate and complete;
- III) That systems to maintain compliance are in place at the facility and will be maintained for the next two years even if processes or operating procedures are changed over the course of this time; and
- IV) That I am fully authorized to make this attestation on behalf of this facility.

I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

Signature:_____ Date:_____

Printed Name:_____ Title:_____

Source of Signatory Authority: ☐ Owner

_____ (other, Please indicate)

- If a Corporation: ☐ President ☐ Secretary ☐ Treasurer
☐ Vice President (If authorized by corporate vote.)
☐ Representative of the above (If authorized by corporate vote and if responsible for overall operation of the facility.)
- If a Partnership: ☐ General Partner
- If a Sole Proprietorship: ☐ Proprietor

Return this form to: RI DEM/Office of Technical & Customer Assistance
Auto Body Repair Facilities Certification Program
235 Promenade Street
Providence, RI 02908-5767
Return the checklist by June 30, 2006



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Rhode Island Department of Environmental Management
Auto Body Repair Facilities Certification Program
2006 Return-to-Compliance Plan Form



- Before you complete this form, make as many copies as needed. Complete a separate Return-to-Compliance Form for EACH compliance question that requires one. Attach to Certification Checklist and return with entire package.
- Only submit a Return-to-Compliance Plan for violations that you were unable to correct BEFORE certifying.
- Completing this form does not relieve the facility of its affirmative responsibility to operate in compliance with applicable regulations. Failure to operate in full compliance with the applicable regulations may result in enforcement actions which may include fines or penalties.

Facility Information

Facility Name: _____

Please note that submittal of this RTC Form gives your facility an additional 60 days to come into compliance.

1. What is the Compliance Question # for which you are reporting noncompliance?
Compliance Question # _____
2. What is the specific violation (reference the workbook section # in which the requirement is explained and a description of the requirement)
Workbook Section # _____

Brief Description of Requirement:

3. What corrective action will you take to return to compliance?

4. Date that facility is expected to be in compliance with this issue? _____



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Rhode Island Department of Environmental Management
Auto Body Repair Facilities Certification Program
2006 Return-to-Compliance Plan Form



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